



EMBARGOED UNTIL 20th NOVEMBER 2022 1730HRS SGT

HRAS GP forum

Context:

As the first line of care in the community, the primary care is often the first point of contact patients have with the healthcare system. General practitioners are also often the gatekeepers to specialist referrals, and play a key role in identifying patients who may benefit from a cardiologist/ electrophysiologist review.

Summary:

Dr Colin Yeo from Singapore opened the session with a talk on premature ventricular and atrial ectopic beats. He shared on the underlying mechanism and possible significance of these premature beats. He emphasised that apart from having a 12-lead electrocardiogram, it is also important to take a good clinical history and physical examination before deciding who should be referred to a specialist.

Next, Professor Young-Hoon Kim from Seoul, Korea, shared about catheter ablation of atrial fibrillation. He emphasised the need for early consideration of rhythm control as success rate of catheter ablation when atrial fibrillation is persistent, especially if it has been present for > 4 years. He also shared about the evolving and emerging ablation techniques and mapping. The importance of lifestyle modifications were also stressed.

Dr Daniel Chong from Singapore shared on syncope, highlighting that history remains crucial in determining the likelihood of cardiac syncope. While physical examination is usually normal, if it is not it can be help. If abnormal, an electrocardiogram can indicate or sometimes even confirm a cardiac cause. He also shared a series of electrocardiograms highlighting common rhythm abnormalities that may be seen in patients presenting with syncope.

Dr Kuan-Cheng Chang from Taiwan closed the session with a talk on identifying patients at increased risk of sudden cardiac death. He shared on the SACAF score which may be useful in discriminating VT/VF from non-VT/VF bystander-witnessed out of hospital cardiac arrest. Further studies incorporating genetic data or artificial intelligence prediction may be helpful to identify patients at high risk of VT/VF sudden cardiac death in the Asia Pacific region.

Message:

Tying in the patient's history, physical examination, risk scores and electrocardiogram findings are key to determining if a cardiology referral is required.

Session details:

HRAS GP forum: Sunday 20th November 2022 12-1 pm SGT

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